



Transcending Borders for Better Health:

Empowering the Future Through
Research, Education, and Care

Ireland-Northern Ireland-National Cancer Institute Cancer Consortium





2009 Accomplishments

While not exhaustive, this list covers a wide range of 2009 activities accomplished or spearheaded by various partners of the All-Ireland National Cancer Institute (NCI) Cancer Consortium. For more details on these accomplishments and who was involved, please refer to the specific information outlined in The Consortium in Action section of this Annual Activities Report.

- Published the Third All-Ireland Cancer Statistics Report
- Conducted four TELESYNERGY® meetings
- Selected St. Vincent's University Hospital Dublin and the Mater Misericordiae University Hospital Dublin as the final installation sites for TELESYNERGY® Lite
- Hosted the 2nd Health Economics Workshop at the Dublin City Library and Archive—attracting more than 70 academic researchers, students, clinicians, and government officials
- Sponsored two new fellows for the HRB NCI Health Economics Fellowship in Cancer Program
- Published *Recommendations for the Establishment of a National Cancer Biobank*
- Hosted the Tracy's Kids International Art Exchange at the St. James's Hospital in Dublin and Our Lady's Children's Hospital, Crumlin
- Accrued almost 1,500 patients to All-Ireland Cooperative Oncology Research Group studies
- Held a public symposium at the Institute of Molecular Medicine St. James's Hospital and Trinity College Dublin called, The Fight Against Cancer: Where Do We Stand?—attracting more than 100 participants
- Hosted 40 cancer care research leaders in Antrim, Northern Ireland, for the Cancer Care Research Workshop
- Funded six Joint Research Projects in Cancer in Ireland and Northern Ireland
- Funded 15 All-Ireland participants in the NCI Summer Curriculum in Cancer Prevention
- Hosted the Cancer 2009: International Cancer Conference at the Institute of Molecular Medicine, St. James's Hospital and Trinity College Dublin. More than 200 delegates from the island of Ireland participated and NCI faculty were featured as speakers
- Coordinated the Conference on Population-Based Cancer Research—the first conference of its kind in Ireland—which took place in Dublin and had more than 145 attendees



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A Message from the Directors

Transcending Borders for Better Health

We are pleased to present the Board of Directors' 2009 Annual Activities Report for the All-Ireland National Cancer Institute (NCI) Cancer Consortium. This year marks the 10-year anniversary of the Consortium, so the report details not only the Consortium's 2009 accomplishments, but also some of its key successes over the past 10 years. In the last decade, the Consortium has sought to further cancer prevention and control efforts on the island of Ireland by promoting the quality of care through research and education and improving disease outcomes through better prevention, diagnosis, and treatment.

By signing the Consortium's 2006 Memorandum of Understanding, our governments committed to improving scientific programmes in the areas of research, diagnosis and treatment, palliative care and survivorship, health economics and cancer policy analysis, education and training, epidemiology, prevention and early detection, public health and patient care, and quality assurance.

Thanks in large part to the partnerships of our governments and hard work of numerous colleagues, we have made some impressive progress on these activities over the years.

Through our work, and the work of our committed colleagues, we have improved the healthcare system in Ireland and Northern Ireland and implemented groundbreaking policy, such as the smoking ban in workplaces and enclosed public places, which have begun to bear fruit. To provide an example, recent studies have shown that the smoking ban is making a positive impact by improving the air quality and respiratory health of many people on the island of Ireland.

As with any great endeavor, all of the Consortium's accomplishments have required a remarkable amount of coordination, collaboration, and cooperation to make them a reality, and we would like to extend a special thanks to our partners, working groups, and Strategic Advisory Group. We would also like to thank Ms. Isabel Otero for her diligence and commitment to moving this report forward.

As we move into the next decade of collaboration, we hope that the Consortium continues to be a driving force in transcending borders to improve the health of millions of families and patients.

Sincerely,



Dr. Tony Holohan
Chief Medical Officer
Department of Health and
Children, Ireland



Dr. Michael McBride
Chief Medical Officer
Department of Health, Social
Services and Public Safety
Northern Ireland



Dr. John E. Niederhuber
Director
National Cancer Institute
United States



Message from the Chair of the Strategic Advisory Group


The All-Ireland NCI Cancer Consortium supports programmes across the continuum of cancer from prevention to palliative care. Since its inception 10 years ago, the Consortium has placed great emphasis on the cancer research that provides the foundation upon which improved cancer prevention and patient care are based. The Consortium has also recognized from the start that programmes are built by people, and so we have sought to enhance the capacity for such programmes through education and training.

In a review of U.S.-Ireland relations published by the Irish government in March 2009, the Consortium is highlighted: *“Since its inception nearly a decade ago, the All-Ireland Cancer Consortium has been an important and productive programme for advancing clinical, public health, and scientific research. The collaborative programme has fostered new training opportunities for the next generation of cancer researchers and care providers from Ireland—North and South—and the U.S. One of the strengths of the programme has been to exchange faculty and trainees and, in the process, forge new collaborations that continue to reap novel insights into cancer research.”*

The Consortium’s 2009 Activities Report begins with a brief update of the status of cancer care and statistics on the island and continues with examples of the Consortium’s efforts to improve scientific research, public health, and clinical capacity. In particular, it showcases the many conferences, fellowship programmes, and other activities that have brought together Ireland, Northern Ireland, and the United States around our shared goals of capacity-building, technology transfer, and knowledge exchange. In addition to providing information on 2009 activities, this report also highlights some of the wonderful work that has been accomplished in the past decade.

The Consortium has clearly transcended borders and joined stakeholders from all three jurisdictions by initiating and participating in multiple activities, only some of which are included here. The chairs of the Working Groups form the core of the Strategic Advisory Group whose full membership is listed on p. 27. It has been my privilege to serve as its Chair for the past several years. Whether organizing workshops and conferences in Ireland, Northern Ireland, or the U.S., implementing TELESYNERGY to enhance connectivity, collaborating on the All-Ireland Cancer Statistic Reports, or engaging in any of the other activities of the Consortium, the Strategic Advisory Group and the individual Working Groups have labored on behalf of better health for their fellow citizens. To all those who served in 2009 and over the past decade, I thank you.

Dr. Joe B. Harford, Director, Office of International Affairs, National Cancer Institute
Chair of the Consortium’s Strategic Advisory Group



State of Cancer Services on the Island of Ireland

The fight against cancer on the island of Ireland faces many challenges in the years ahead. Despite different models of funding and provision for medical services, the similarities in cancer patterns between Ireland and Northern Ireland generally outweigh the differences.

On the island, the most rapidly changing factor affecting cancer levels is the changing population size and age distribution. Between 1994 and 2004, the overall population rose by 10.0% with an increase in the percentage aged 60 and above (15.8% to 16.2%), and a decrease in the percentage aged 15 to 24 (24.7% to 20.9%). This will place a substantial burden on the health services of Northern Ireland and Ireland as one in every three persons will develop a cancer by the time he or she reaches 75 years of age.

Incidence of cancer increased over the 10-year period beginning in 1994, with an annual increase of 584.5 cases each year. On the island, cancer is the most common cause of death, accounting for one quarter of all deaths between 2001 and 2004. However, new treatments and screening services are continuously being made available, as well as measures to reduce lifestyle factors that may contribute to the development and progression of cancer. To learn more about the impact of cancer on the island, please download the *Third All-Ireland Cancer Statistics Report* at www.allirelandnci.com/publications/statistics_third_report.shtml.

Ireland

The National Cancer Registry of Ireland registered an annual average of 29,193 new cases of cancer from 2006-2008, of which 24,332 were invasive cancers including non-melanoma skin cancer (NMSC). The most common invasive cancers overall (apart from NMSC) were prostate (2,606 cases), female breast (2,520 cases), colorectal (2,252 cases), and lung cancer (1,947 cases).

Breast cancer was, apart from NMSC, the most common diagnosis in women, followed by colorectal and lung cancers. In men, prostate cancer was the most common diagnosis, also followed by colorectal and lung cancers. An estimated 8,172 people died from cancer in 2006, which is the most recent year for which final figures are available. Lung cancer was the most frequent cause of cancer death overall in Ireland.

According to figures from the National Cancer Registry, national estimates for three successive diagnosis periods (1994-1997, 1998-2001, and 2002-2006) show clear evidence of ongoing improvements in survival for most cancers. The estimated five-year survival rates for female breast cancer rose to more than 80% for women diagnosed

“The number of newly diagnosed cancers in Ireland is increasing by 6-7% every year, making the Consortium’s goal of reducing the incidence of and mortality from cancer in Ireland extremely relevant.”

Dr. Tony Holohan, Chief Medical Officer, Department of Health and Children

between 2002-2006, compared with 77% for women diagnosed in the period from 2000-2004.

2009 Accomplishments

- **BreastCheck:** This national breast cancer screening programme completed national rollout in 2009 and screened almost 120,000 women aged 50-64 years. As of early 2009, the overall acceptance of the screening invitation was 77.4%.
- **CervicalCheck:** This national cervical screening programme completed its first full year of operation and screened more than 230,000 women. On average, the programme has been processing 1,000 tests per day since it launched in 2008.
- **National Cancer Control Programme (NCCP):** The NCCP completed the reorganisation of breast cancer diagnosis

and surgery into eight centres, which was the Cancer Programme’s first priority when it was launched in 2007.

- **Community Oncology Programme:** This programme continued its work on educating health professionals in the community to increase capacity, promote best practises in cancer control, and focus on cancer prevention and the appropriate and timely referral of suspected cancer cases.
- **Rapid Access Diagnostic Clinics:** The first Rapid Access Diagnostic Clinics for both lung and prostate cancer were established to enhance access to diagnosis and multidisciplinary decision making for these cancers.
- **National Plan for Radiation Oncology:** Construction began on new radiation oncology facilities at two Dublin hospitals. The facilities are expected to be operational in 2010.

“The Department of Health, Social Services and Public Safety and the other stakeholders in Northern Ireland value the ongoing cooperation achieved through the Ireland-Northern Ireland-NCI Cancer Consortium in enhancing cancer research, education, and training across the island of Ireland.”

Dr. Michael McBride, Chief Medical Officer, DHSSPS

Northern Ireland

In Northern Ireland, there are approximately 9,800 new cases of cancer diagnosed and approximately 3,800 deaths from cancer each year—making cancer the second most common cause of death after diseases of the circulatory system. Five-year survival rates for common cancers currently stand at 80.3% for breast cancer; 8.5% and 9.3% for lung cancer in males and females respectively; 50.4% and 53.7% for colorectal cancer in males and females respectively; and 71% for prostate cancer.

Cancer care is provided to the 1.7 million people living in Northern Ireland through five Health and Social Care (HSC) Trusts that became operational on 1 April 2007. Specialist radiotherapy services are currently provided by the Northern Ireland Clinical Cancer Centre (NICC), which opened in March 2006 and is located in the Belfast HSC Trust.

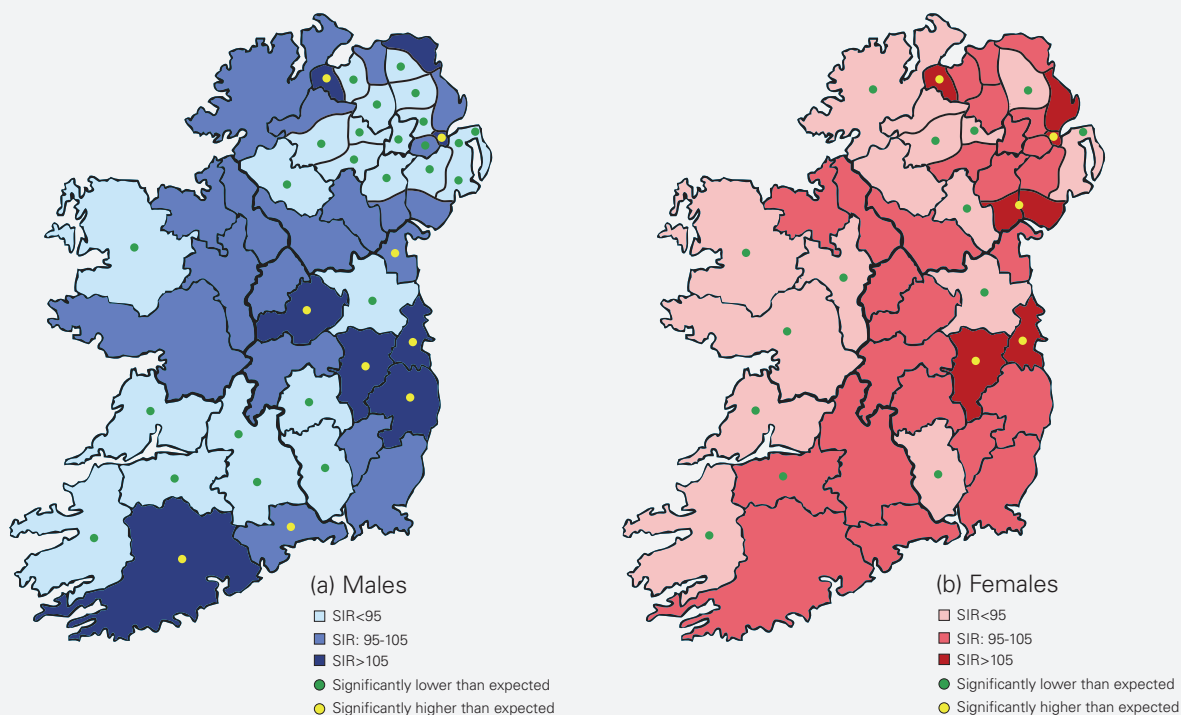
In addition to the specialist cancer care provided in the NICC and at the four cancer units in the other Trusts, community support and care is also provided across Northern Ireland. Additional investments for cancer services and developments are planned,

including adding consultant medical staff, improving access to radiotherapy, and introducing cervical and prostate cancer brachytherapy.

2009 Accomplishments

- **Breast cancer screening:** Northern Ireland's breast cancer screening uptake rate has been increasing steadily on a yearly basis and is currently at 76%. In 2009, breast cancer screening was extended to include women up to age 70, which enabled an additional 45,000 women to be invited for breast screening across Northern Ireland. There is a 97% survival rate at five years for those women who have been detected to have breast cancer through the screening programme compared to the average 80.3% for all breast cancers.
- **Cervical screening:** The cervical screening uptake rate has been increasing steadily on a yearly basis and is currently at 75%, with approximately 120,000 women aged 20-64 years being screened for cervical cancer.

Figure 1: Significant differences in county/council standardised incidence rates (SIR) for all cancers (excluding NMSC) compared to Ireland as a whole: 1994-2004



Source: Donnelley DW, Gavin AT, Comber H. 1994-2004: A Comprehensive Report. Northern Ireland Cancer Registry/National Cancer Registry, Ireland; 2009.



Diagnosis and Treatment

Improving the ability of health professionals to diagnose and treat cancer effectively is a critical and key objective of the Consortium. The Consortium's Information Technology Working Group is tasked with exploring and providing the tools and resources needed to strengthen the cancer informatics infrastructure on the island of Ireland. Through available technologies such as TELESYNERGY® and advanced imaging software, professionals are able to access the data and resources they need to enhance patient diagnosis and treatment. In addition to supporting these technology efforts, the Consortium facilitates forums that bring together medical professionals to share new diagnosis and treatment protocols and insights into improved cancer care.

TELESYNERGY®: Streamlining Collaborative Research and Care

The Consortium's Information Technology Working Group uses the TELESYNERGY® System to enhance collaboration among Consortium partners and achieve larger programme goals, especially around diagnosis and treatment. TELESYNERGY® was developed by the National Institutes of Health's (NIH) Center for Information Technology and is a multimedia medical imaging workstation that combines cameras, microscopes,

audio equipment, and a variety of peripheral devices. It is used both nationally and internationally to enable clinicians and scientists in multiple locations to collaborate on research activities as if they were standing side-by-side. TELESYNERGY® makes joint consultations, advanced training, and participation in off-site research possible.

The TELESYNERGY® System addresses several goals of the All-Ireland National Cancer Institute (NCI)

10 years

TELESYNERGY® Timeline

Enhanced clinical research and educational opportunities for healthcare professionals have been made possible through the installation of 10 state-of-the-art TELESYNERGY® multimedia medical imaging workstations across the island of Ireland. This programme was launched on the island of Ireland with the help of the Center for Information Technology (CIT) at the National Institutes of Health and included the specific guidance of Kenneth M. Kempner, Chief of the Telemedicine and Applied Imaging Section of CIT's Division of Computational Bioscience, and Robert Martino, Ph.D., former Director of CIT's Division of Computational Bioscience.

2000

- TELESYNERGY® installation begins on the island of Ireland
- Installation completed at Belfast City Hospital (Belfast)
- Installation completed at St. Luke's Hospital (Dublin)

2001

- Installation completed at Trinity College Dublin, St. James's Hospital Campus (Dublin)

Cancer Consortium, including:

- Improving diagnosis and treatment
- Enhancing education and training for physicians, nurses, and scientists
- Enhancing public-health and patient care
- Assuring quality care
- Facilitating clinical trials and clinical research

2009 Accomplishments

This past year brought us one year closer to the final installation and completion of the ten-year TELESYNERGY® System project, which enables all participating hospital sites to participate in a cohesive and highly-flexible telemedicine network. In addition, the presence of a similar system at Belfast City Hospital Cancer Centre has allowed connectivity with colleagues in Northern Ireland.

In 2009, four TELESYNERGY® meetings were held on clinical topics such as the usage of behavioural intervention for symptom management and the interphase between oncology and palliative care.

“The TELESYNERGY® System helps us to bring together a range of clinical experts that was simply not possible before the system was developed in Ireland. It has enhanced the care of thousands of cancer patients in Ireland since 2000,” said Donal Hollywood, Chair of the Consortium’s Information Technology Working Group.

The TELESYNERGY® System is due for completion in 2010 following final funding approval by the National Cancer Control Programme.

To learn more about TELESYNERGY®, please visit: www.allirelandnci.com/programs/telesynergy.shtml.

Engaging Nurses Through TELESYNERGY®

“I am particularly excited with the potential of the TELESYNERGY® technology to develop the collaborative approach to the sharing of information across the Atlantic.” (Mr. Martin Bradley, Chair of the Consortium’s Nursing Working Group, 2009)

The Consortium’s Nursing Working Group includes oncology nurses, clinicians, educators, researchers, and managers who collaborate to enhance communication among nurses engaged in cancer care across the island of Ireland. Georgie Cusack and Elizabeth Ness, as members of the Nursing Working Group and representatives of the NCI, coordinate training for the nurses who are visiting the National Institutes of Health through the NCI Clinical Trials Training for Nurses, and broaden educational activities through quarterly videoconferences that use TELESYNERGY® technology.

As part of the 2007-2010 work plan to enhance the communication process and help nurses compare nursing practises with their national and international peers, the first cancer nurse TELESYNERGY® education session was hosted by Belfast on 27 May 2008. Attendees from the NCI and St. Luke’s Hospital in Dublin heard Dr. Joanne



Martin Bradley

Chair of the Consortium's Nursing Working Group (2009)

Martin Bradley's clinical background is in general and psychiatric nursing and nurse education. Mr. Bradley has held a series of Senior Management and Director of Nurse Education posts in the Health and Social Care Services and is Chief Nursing Officer for Northern Ireland at the Department of Health, Social Services and Public Safety, Belfast.



Sheila O'Malley

Chair of the Consortium's Nursing Working Group (2010)

Sheila O'Malley is currently Chief Nursing Officer in the Nursing Policy Division of the Department of Health and Children in Ireland. She was formerly Director of the Nursing and Midwifery Planning and Development Unit, Health Service Executive Dublin Mid Leinster and Dublin North East. She was president of An Bord Altranais (Irish Nursing Board) from 1997-2002.

2002	2003	2004	2005	2006	2007	2008	2009
<ul style="list-style-type: none"> • TELESYNERGY® User Group formed • Three-way TELESYNERGY® demonstrated at St. Luke's Hospital (Dublin) with former NIH Director Dr. Elias Zerhouni and former NCI Director and BOD member Dr. Andrew von Eschenbach 	<ul style="list-style-type: none"> • First TELESYNERGY® User Group meeting held at NIH 	<ul style="list-style-type: none"> • TELESYNERGY® suite installed at Division of Radiation Therapy, School of Medicine, Trinity College Dublin • Development of a National TELESYNERGY® Network for Oncology Service in Ireland announced by Minister of the Department of Health and Children of Ireland 	<ul style="list-style-type: none"> • TELESYNERGY® equipment installed in University College Hospital (Galway) and Cork University Hospital (Cork) 	<ul style="list-style-type: none"> • TELESYNERGY® Lite equipment installed in Letterkenny General Hospital (Letterkenny) 	<ul style="list-style-type: none"> • TELESYNERGY® Lite equipment installed in Waterford Regional Hospital (Waterford) 	<ul style="list-style-type: none"> • TELESYNERGY® equipment installed in Beaumont Hospital (Dublin) • First cancer nurse TELESYNERGY® education session hosted by Belfast • Second cancer nurse TELESYNERGY® education session held 	<ul style="list-style-type: none"> • Four cancer nurse TELESYNERGY® education events held • St. Vincent's University Hospital (Dublin) and the Mater Misericordiae Hospital (Dublin) selected as TELESYNERGY® Lite installation sites after National Cancer Control Programme (NCCP) review

10 years

Improving Diagnosis and Treatment

The major clinical application for TELESYNERGY® is the facilitation of numerous tumour boards and multidisciplinary oncology meetings in the hospitals involved in cancer care. In many cases, these meetings occur several times per week and often involve more than 50 oncology healthcare professionals. At St. James's Hospital, for example, the system is now used on a weekly basis to discuss the vast majority of new and complex patients presenting with new cancer diagnoses, including those with thoracic, gastrointestinal, lymphoma, genito-urinary, head and neck, and breast cancers.

Additionally, physicians working in regional and general hospitals that are linked to the cancer centres also participate in these meetings using either their own TELESYNERGY® Lite or other telemedicine systems. This enables a wide network of healthcare professionals and their multidisciplinary teams to agree to the optimal management plans for individual patients.

In addition to clinical care, other major roles for the TELESYNERGY® System include extensive undergraduate and postgraduate education programmes, and the routine linkage of many groups involved in clinical trials and ICORG.

Reid from the School of Nursing and Midwifery, Queens University, Belfast discuss "Living with Cachexia." Five additional sessions have taken place since this first nursing-focused TELESYNERGY® session.

Cancer 2009: International Cancer Conference

"The support of the Consortium has been crucial to the success of this Conference, and the inclusion of a National Cancer Institute Lecture delivered this year by Professor Hedi Hricak gives both the NCI and the Consortium added prominence on the island of Ireland." (Professor Mark Lawler, Chair of the Consortium's Scholar Exchange and Training Working Group)

More than 270 delegates gained new insights into high-quality cancer science and medicine at CANCER 2009, the International Cancer Conference. Delegates and speakers gathered at the Institute of Molecular Medicine, St. James's Hospital, and Trinity College Dublin from 13-15 May 2009.

The conference exposed Irish scientists, clinicians, nurses, and allied health professionals to high-level national and international leaders in cancer biology, health economics, translational medicine, radiotherapy, clinical trials, molecular imaging, and cancer nursing.

Minister for Health and Children, Mary Harney, T.D., opened the conference by calling for greater integration and more coordination of services. Picking up on that theme, Professor Ralph deVere White of the UC Davis Cancer Center in the United States said, "Cancer care services can no longer be delivered effectively by any one specialist because it's too complicated and it's too expensive. The full range of services from prevention, diagnosis, right through to end-of-life issues must all be managed in a coordinated team science fashion."

Speaking on knowledge transfer from the lab to the bedside, Professor Tom Keane, Interim Director of the Health Service Executive National Cancer Control Programme stressed that, "In order for this transfer to be most effective,



Professor Donal Hollywood

Chair of the Consortium's Information Technology Working Group

Professor Hollywood is a Marie Curie Professor of Clinical Oncology and head of the Academic Unit of Clinical and Molecular Oncology at Trinity College Dublin. He has played a major role in the development of cancer services within Ireland as Chairperson of the National Expert Group on Radiation Oncology, particularly through the publication of the strategic advisory document entitled the *Development of Radiation Oncology Services in Ireland* (a.k.a. *The Hollywood Report*).

we need to adopt best practises and we need an integrated system driven by best practises at the primary care level. This will allow the facilitation of early diagnosis for the major cancers through availability of rapid access clinics."

Professor Jane Wardle of University College, London, after sharing conclusions on research linking obesity to cancer, said, "Many public health organisations are looking for lessons learned from tackling smoking. The similarities between the two indicate that strategies such as public education, health professional endorsement, and environmental modifications to make healthy choices easier will be needed to turn the tide of obesity."

Feedback from the delegates was highly positive and plans are underway for the next conference in 2011, which will coincide with the tercentenary of the School of Medicine, Trinity College Dublin.

“Since 2001, the National Cancer Institute has trained over 300 scholars from the island of Ireland; an impressive accomplishment that makes our efforts in education and training one of the Consortium’s greatest success stories.”

Isabel V. Otero, Consortium Director,
All-Ireland NCI Cancer Consortium

Education and Training



The Consortium recognizes that an important component of improving the state of cancer control and research on the island of Ireland long-term is the building of a capable workforce with the skills and knowledge necessary to practise cancer control. The Scholar Exchange and Training Working Group was established to address the need for a more highly-trained cadre of cancer professionals on the island of Ireland. Consortium-endorsed scholars are exposed to challenging coursework, networking opportunities, hands-on training on the island of Ireland and in the United States, and other methods to enhance their knowledge of cancer topics and to develop relationships across borders.

Table 1: Number of Scholars Supported by the Consortium (2000-2009)

Number of Scholars endorsed by the Consortium by jurisdiction and programme, 2000-2009.					
Type of Exchange Programme	Duration of Programme	Participants by Jurisdiction			Total Participants
		Ireland	Northern Ireland	United States	
Epidemiology Fellowship	3 years	2	1	1	4
NCI Clinical Trials Training for Nurses	3 weeks/3 months	11	7		18
Clinical Trials E-learning Module for Nurses	12 weeks	17	23		40
Health Research Board (HRB)/NCI Health Economics Fellowships in Cancer Program	4 years	4			4
NCI Summer Curriculum in Cancer Prevention: Molecular Prevention Course	1 week	110	38		148*
NCI Summer Curriculum in Cancer Prevention: Principles and Practice of Cancer Prevention and Control Course	4 weeks	73	35		108†
NCI Cancer Prevention Fellowship Program	4 years	3	4		7
Joint Research Projects in Cancer (JRPC)	2-3 years	8‡	5	7	20

* The total number of participants includes fellows who completed the course as a requirement for the NCI CFPF, JRPC, and HRB/NCI Health Economics Fellowships in Cancer.
† The total number of participants includes fellows who completed the course as a requirement for the NCI CFPF, JRPC, and HRB/NCI Health Economics Fellowships in Cancer.
‡ The number of Irish participants includes Irish fellows who completed Joint Research Fellowships in Cancer.



Professor Mark Lawler

Chair of the Consortium's Scholar Exchange and Training Working Group

Professor Mark Lawler is the Associate Professor in Experimental Haematology/Oncology at Trinity College Dublin; Chief Molecular Geneticist at St. James's Hospital; President of the Irish Association of Cancer Research; and Founder and Chairperson of the International Cancer Conference, the seventh of which took place in May 2009. His research group is working on the molecular basis of cancer and its translation into biomarker discovery and anti-cancer approaches.

Consortium scholars have diverse research interests, demonstrate commitment to reducing the burden from cancer, and have published more than 50 peer-reviewed articles in publications such as the *New England Journal of Medicine*, *Journal of Clinical Oncology*, *The Lancet*, and the *Irish Journal of Medical Science*.

To learn more about the scholar and training programmes, please visit: www.allirelandnci.com/fellowships_and_training.

HRB/NCI Health Economics Fellowships in Cancer Program

"The best part of the HRB/NCI Health Economics Fellowship is that it allows me to be part of state-of-the-science research here in the U.S. and work with people from diverse areas of cancer care and prevention." (Rebecca Moore, HRB/NCI Health Economics Fellow, 2008-2012)

The HRB/NCI Health Economics Fellowship Program aims to encourage successful applicants to pursue careers in health economics on the island of Ireland. The duration of the Fellowships awarded is four years and leads to a Ph.D. degree in health economics that is administered in association with the Health Research Board (HRB) PhD Scholars Programme

in Health Services Research and awarded by Trinity College Dublin.

The Fellowship begins with approximately 10 months of coursework in health economics, cancer prevention, and health policy—based mainly in Ireland—followed by two years of mentored research at one of seven NCI-designated "mentor sites" in the United States or Europe. The final year of study will take place at one of eight mentor sites in Ireland.

The U.S. oversight and mentors committee for this programme is led by NCI staff—Martin Brown, Isabel Otero, Joe B. Harford, and Eric "Rocky" Feuer—and includes participation from several NCI grantees. A second cohort of fellows started the programme in 2009 and a third round of applications was awarded in 2010.

2009 Highlights

The second cohort of the HRB/NCI Health Economics Fellowship began its coursework in 2009. Two Irish fellows—Diarmuid Coughlin, M.S.C., and Elizabeth Moore, M.P.H.—spent the year taking classes at Trinity College Dublin. After completing their coursework, they will pair up with mentors at one of the seven NCI-designated "mentor sites". During their fellowships, Diarmuid plans to study the "economic factors impacting cancer care" while Elizabeth will focus on "economic evaluations of various cancer screenings."

After attending the 2009 Principles of Cancer Prevention four-week course, Diarmuid said, "The summer course at the NCI has been the best experience. It also enabled me to go to Capitol Hill and listen to the healthcare reform bill, which was an eye-opening experience!" Elizabeth particularly enjoyed meeting researchers from other countries, finding out how cancer programmes are organized in their countries, and understanding the barriers they face to implementing effective cancer control programmes.

Joint Research Projects in Cancer (JRPC)

"The Consortium scholars programme gave me an academic platform that paved the direction of my current and future academic research." (Zubiar Kabir, JRPC fellow, 2006-2008)

The Joint Research Projects in Cancer (JRPC) programme aims to develop strong and sustainable relationships between cancer researchers and research institutions on the island of Ireland and in the United States by supporting collaborative research between Irish and U.S. principal investigators (PIs) on a cancer research project of mutual interest. There is now a critical mass of interest in population-based cancer research and, therefore, movement toward more collaborative research that involves universities, cancer epidemiologists, and others.

Both the Health Research Board and the Health and Social Care Research

Scholar Spotlight

The first two HRB/NCI Health Economics Fellows—Rebecca Moore, MA, MSC, and James O'Mahony, MA—are in their second year of this four-year programme. Rebecca is currently in Chapel Hill, North Carolina, taking classes related to cancer prevention and working under the supervision of Dr. Sally Stearns and mentorship of Professor Bill Carpenter on a special project related to her interest in the cost of genetic biomarkers in cancer care.

James is now in his first year of a rotation with Professor Dik Habbema at the Erasmus MC, University Medical Center Rotterdam, Netherlands, where he is studying the impact of various discounting assumptions in different Cost Effectiveness Analysis (CEA) models. James shared, "The scholars programme has allowed me to work with leading researchers in my field. This has given me access to a great resource in terms of experience and skills that has yet to develop in Ireland."

and Development Division fund the JRPC projects, which are awarded on a full-time basis over three years. PIs from the island of Ireland are eligible to apply for the award and are expected to partner with a PI from the United States to develop a research proposal that benefits both jurisdictions. The PIs are also expected to select a post-doctoral fellow from Ireland or Northern Ireland to join their team. Both Irish and American PIs are responsible for training the fellow.

The award requires the post-doctoral fellow to spend at least one year conducting research under the supervision of the PI from Ireland or North Ireland and at least one year conducting research under the supervision of the American PI. The JRPC projects may include research into topics such as the clinical sciences, translational and public health research, epidemiology, and health service and practise-based research. For a list of the 2009 JRPC-funded projects (Table 2).

NCI Cancer Prevention Fellowship Program (CPFP)

“The CPFP has allowed me to develop an expansive network of peers and senior scientists within the NCI and outside and I hope to maintain relationships and collaborate long into the future.”
(Gwen Murphy, Ph.D., M.P.H.; CPFP Fellow, 2005)

Scholar Spotlight

Zubiar Kabir was a 2006-2008 JRPC Fellow and also participated in the 2007 NCI Summer Curriculum. As of 2009, he is based at the Tobacco Free Research Institute in Dublin pursuing his interest studying tobacco control and the population health effects from tobacco use. He is evaluating comprehensive tobacco control programmes in the United States (Massachusetts) and Europe (Ireland)—specifically, the health effects both in the general population and in vulnerable populations, such as immigrants, pregnant mothers, young children, etc. Since 2007, Kabir has published 20 articles in journals such as the *International Journal of Public Health*, *Irish Journal of Medical Science*, *Journal of Community Health*, *New England Journal of Medicine*, and *BMC Public Health*. In May 2009, he was admitted as a Fellow of the Royal Academy of Medicine in Ireland.

The NCI Cancer Prevention Fellowship Program (CPFP) encourages fellows to pursue careers in cancer prevention and control on the island of Ireland. It equips participants to embark on such careers by giving them an opportunity to obtain a Master of Public Health (M.P.H.) degree in Ireland or Northern Ireland in year one, followed by three years of mentored research in the NCI's Cancer Prevention Fellowship Program in Bethesda, Maryland. Fellows may apply for a fifth year of research funding to facilitate their return to Ireland or Northern Ireland to set up independent research in collaboration with an established mentor on the island of Ireland. Since 2002, there have been seven CPFP Scholars (see Table 3).

The CPFP is part of the Center for Cancer Training (CCT), which is under

the NCI Office of the Director. Each year, OIA partners with the CCT to administer the international component of the Summer Curriculum Courses in Cancer Prevention Program as well as the CPFP, in which the Irish have been participating since 2002.

2009 Highlights

In 2009, more than 10 peer-reviewed journal articles were published by NCI Cancer Prevention Fellows in journals such as the *British Journal of Cancer*, *Cancer Causes and Control*, *European Journal of Gastroenterology and Hepatology*, *International Journal of Cancer*, and *Proceedings of the National Academy of Sciences*.

Several CPFP Fellows also received awards or other recognition in 2009.

Table 2: 2009 JRPC-Awarded Projects

All-Ireland Principal Investigator	U.S. Principal Investigator	JRPC Fellows	Project Title
Dr. Dean Fennell Centre for Cancer Research & Cell Biology Queen's, University Belfast (<i>Belfast</i>)	Prof. Courtney Broaddus University of California School of Medicine (<i>San Francisco</i>)	Dr. Dario Barbone University of California (<i>San Francisco</i>)	“Molecular mechanisms underlying sensitivity and resistance to the 20S proteasome inhibitor bortezomib in mesothelioma”
Prof. Ken Mills Centre for Cancer Research & Cell Biology Queen's, University Belfast (<i>Belfast</i>)	Dr. Stephen Chanock Division of Cancer Epidemiology & Genetics, National Cancer Institute (<i>Bethesda</i>)	Dr. Kerry Pettigrew Queen's University Belfast (<i>Belfast</i>)	“Common genetic variants as predictors of susceptibility and outcome in adult acute myeloid leukemia”
Prof. Liam Murray Centre for Clinical & Population Sciences Queen's, University Belfast (<i>Belfast</i>)	Dr. Christian Abnet Division of Cancer Epidemiology & Genetics, National Cancer Institute (<i>Bethesda</i>)	Dr. Mark O'Doherty Queen's University Belfast (<i>Belfast</i>)	“Investigation of the roles that antioxidant and iron status may play in the development of oesophageal adenocarcinoma and its precursor states”
Dr. Linda Sharp National Cancer Registry (<i>Cork</i>)	Prof. Cathy Bradley Department of Health Care Policy and Research, Virginia Commonwealth University (<i>Richmond</i>)	Dr. Tara Finnerty National Cancer Registry (<i>Cork</i>)	“Assessing the impact of cancer on employment and work: A study of adult cancer survivors in Ireland”
Dr. Charles Spillane University College Cork (<i>Cork</i>)	Dr. John Greally Albert Einstein College of Medicine (<i>New York</i>)	Dr. Mohan Muniyappa University College Cork (<i>Cork</i>)	“MicroRNAs, cancer and epigenomes”

Sharon Glynn received the 2009 NIH Fellows Award for Research Excellence and was also awarded special recognition during the NCI-CCR Fellows and Young Investigators Retreat for her presentation on a breast cancer study.

Brid Ryan also received a 2009 NIH Fellows Award for Research Excellence, as well as the NCI Director's Innovation Award for Oral Presentations and the 2009 Merit Award for Outstanding Performance as a Cancer Prevention Fellow. "The Cancer Prevention Fellowship is a wonderfully dynamic training experience. In addition to the M.P.H. and Summer Curriculum in Cancer Prevention and Control, the breadth of opportunities available to Fellows at the NCI laid the groundwork for our futures as independent scientists," reflected Dr. Ryan.

NCI Summer Curriculum in Cancer Prevention

"The training has really ignited a passion for my work and has opened my eyes to new avenues of interest and research methods that I had previously

Table 4: 2009 Summer Curriculum Participants

Principles of Cancer Prevention and Control (Four week Course)	Molecular Prevention (One-week Course)
Finian Bannon	Sinead Ahern
Ruth Boyd	Emma Allott
Diarmuid Coughlin	Francesco Caiazza
Anne Dee	Suzanne Cloonan
Andrea Duignan	Olga Gurvick
Jackie Kelly	Helen Henneghan
Davinia Kingston	Elaina Magin
Eleanor McArdle	Therese Murphy
Paula McCloskey	Anthony O'Connor
Ethna McFerran	Sumanainzah Sukor
Elizabeth Moore	Linda Sullivan
Michael O'Rourke	
Janice Ringland	
Suzanne Roy	
Claire Wilson	
* There were 26 total participants in 2009: 8 from Northern Ireland and 18 from Ireland	

Table 3: NCI Cancer Prevention Fellowship Scholars (2000-2008)

Fellow	Home	Entry Year	Research Interest
Marie Cantwell, Ph.D., M.P.H.	Northern Ireland	2002	Nutritional factors related to the development of oesophageal adenocarcinoma, early life influences on brain cancer, and pharmaceutical exposures and risk of pancreatic cancer
Lesley Anderson, Ph.D., M.P.H.	Northern Ireland	2005	Epidemiology of oesophageal adenocarcinoma and haematological malignancies
Sharon Glynn, Ph.D., M.P.H.	Ireland	2005	The role of inflammation and oxidative stress in oestrogen receptor negative breast cancer progression and patient survival
Gwen Murphy, Ph.D., M.P.H.	Ireland	2005	Dietary and infectious involvement in the aetiology of gastrointestinal cancers
Amanda Black, Ph.D.	Northern Ireland	2006	The aetiology and early detection of prostate and ovarian cancer
Brid Ryan, Ph.D., M.P.H.	Ireland	2006	Stem cell biology in lung cancer and the role of genetic variation in microRNA networks and cancer risk
Paula Hyland, Ph.D.	Northern Ireland	2008	Investigating the molecular epidemiology of Barrett's oesophagus and oesophageal adenocarcinoma
* There have been 7 total participants: 4 from Northern Ireland and 3 from Ireland			

not considered." (Claire Wilson, NCI Summer Curriculum Participant, 2009)

The U.S. National Cancer Institute (NCI) conducts two courses for healthcare professionals through its Summer Curriculum in Cancer Prevention Program: a four-week course focused on the principles and practise of cancer prevention and control, and a one-week course focused on molecular cancer prevention.

These courses take place in Rockville, Maryland, and feature faculty members from throughout the United States. Healthcare professionals from Ireland and Northern Ireland join participants

from cancer centres, universities, health departments, industry, and government from around the world to take part in this four-week or one-week training. The HSC R&D Division, HRB, and NCI support these programmes by providing direct and in-kind funding.

2009 Highlights

The 2009 NCI Summer Curriculum included 15 All-Ireland applicants for the four-week Principles of Cancer Prevention and Control course and 11 participants in the one-week Molecular Prevention course (see Table 4).

Programme Spotlight

"What surprised me most about the course was just how diverse a group there was attending. You had medical oncologists/pathologists from Africa, Asia, Russia, etc., and public health physicians, statisticians, geneticists, epidemiologists, health economists, and researchers from all over the world. I loved the commentary and discussion this evoked." (Michael O'Rourke, Principles of Cancer Prevention and Control four-week course participant, 2009)

"This course has widened my perspective and given me a great overview and summary of cancer research. In the future I believe it will help me to think outside the box when troubleshooting or brainstorming new research ideas." (Sinead Ahern, Molecular Prevention one-week course participant, 2009)

10 years

NCI Clinical Trials Training (CTT) for Nurses Programme

"My best experience as a scholar was working along with the NCI research nurses to develop an educational tool for training staff nurses caring for clinical trial patients." (Wendy Cunningham, CTT Scholar, 2004)

The Consortium's Nursing Working Group was initially established to help address the shortage of research-trained nurses and enhance the infrastructure and capacity for cancer research and education on the island of Ireland. One of its key activities has been to partner with Georgie Cusack, a Clinical Nurse Specialist at the NIH Clinical Center, and Elizabeth Ness, Director for Staff Development for the Center for Cancer Research at the NCI, to plan the Clinical Trials Training (CTT) programme for cancer nurses.

In this programme, cancer nurses spend five weeks in the United States learning the role of the research nurse in caring for patients on clinical trials. By working closely with oncology nurse-preceptors at the NIH Clinical Research Center, the nurses learn the components of clinical trial management—including the roles and responsibilities of team members—and focus on a team approach to managing clinical trials. Since 2002, there have been 18 participants in the CTT programme (see Table 5).

"The CTT represents a unique partnership between the Office of the Director and NCI's Intramural Research Program to bring state-of-the-art clinical trials training to Irish nurses in various clinical protocols," reflected Isabel V. Otero, International Program Director for the OIA. "It is also distinct because it is a trans-NIH collaboration between the NCI's Center for Cancer Research (CCR), NIH's Clinical Research Center (CRC), and the NCI's Office of International Affairs (OIA)."

Table 5: Clinical Trials Training for Nurses Programme Participants (2002-2007)

Time Period	Participants
Spring 2002	Naomi Hill (NI), Catherine O'Brien (I), Marie Sheehan (I)
Fall 2002	Ruth Boyd (NI), Marie Cox (I), Mairead Devine (NI), Louise Sherwin (I)
Fall 2003	Mary Doody (I), Elizabeth Morrin (I)
Fall 2004	Wendy Cunningham (NI), Ruth Hall (NI), Eileen Hanley (I)
Fall 2006	Aishleen Brunton (NI), Aine Byrne (I), Clodagh McHugh (I), Lorraine McKenna (NI)
Fall 2007	Aisling Corcoran (I), Deirdre McDonnell (I)
* There have been 18 total participants since 2002: 7 from Northern Ireland (NI) and 11 from Ireland (I)	

10 years

Epidemiology Fellowship

"It seems unreal that it's now ten years since I embarked on the Consortium Fellowship in Cancer Epidemiology - but the training, experience and wider perspectives I gained continue to inform and inspire my work today and I expect will do so well into the future." (Paul Walsh, Consortium Fellow in Cancer Epidemiology, 2001-2003)

The Consortium periodically facilitates three-year fellowships in cancer epidemiology. The fellowship includes one year of research at the National Cancer Institute (NCI) and two years of research in Ireland and/or Northern Ireland. This programme was jointly funded by the Health Research Board (Ireland) and the Research and Development Division of the DHSSPSNI (Northern Ireland), with the support of the NCI, between 2001 and 2006.

Three fellows—Dr. Paul Walsh and Dr. Deirdre Cronin from Ireland and Dr. Peter McCarron from Northern Ireland—were funded to take a three-year training programme in cancer epidemiology. One year of the fellowship was hosted at the SEER Program at the NCI, with two years of training and work experience at the Northern Ireland Cancer Registry and the Irish National Cancer Registry. The three fellows contributed significantly to the work of the registries, particularly in North-South collaborative projects, and also carried out some projects with research teams at the NCI in the course of the programme.

Additionally, one fellow from the United States—Joseph Campo—was funded as a Special Project Epidemiology Fellow to collaborate with the two registries to develop the *All-Ireland Cancer Statistics Second Report 1998-2000*, which provided a comprehensive analysis of cancer incidence, mortality, and survival for the island of Ireland during that three-year period.



Epidemiology

The Consortium's Cancer Registries and Epidemiology Working Group brings together epidemiologists from the population-based cancer registry programmes of Ireland and Northern Ireland with their counterparts at the National Cancer Institute (NCI), including those in the Surveillance Epidemiology and End Results (SEER) Program.

The epidemiology objectives for 2009 were to explore new avenues of cooperation between the registries, foster population-based cancer research on the island of Ireland, develop joint research activities, and increase awareness of the cancer registries and their achievements.

Exploring New Avenues of Cooperation: The All-Ireland Cancer Report

"The launch of the Third All-Ireland Cancer Report was the culmination of three years of collaborative work and provides us with an excellent reference volume on cancer incidence, treatment, and survival on the island of Ireland." (Dr. Anna Gavin, Chair of the Consortium's Cancer Registries and Epidemiology Working Group)

The *Third All-Ireland Cancer Report* serves as a valuable reference for all aspects of cancer care on the island. It was launched by the Minister for Health & Children for Ireland, Ms. Mary Harney, T.D., at the Royal College of Physicians of Ireland in Dublin on the 24 April 2009 and has been widely circulated.

The report was compiled by the Northern Ireland Cancer Registry (NICR), based at Queen's University, Belfast (QUB), and the National Cancer Registry Ireland (NCRI), in Cork. It was edited by Dr. David Donnelly and Dr. Anna Gavin at the Northern Ireland Cancer Registry, and Dr. Harry Comber at the National Cancer Registry, Ireland. NCI representatives were also present at the launch of this report.

Cancer control activities have been planned in both countries by using this All-Ireland report to identify priority areas, variation in risk, and important trends. For the first time, information on cancer treatments and outcomes has also been included to facilitate direct comparisons of the activity and outcomes of the two health systems.

The report sheds light on trends in prevention and early detection, diagnosis and treatment, enhanced public health, and patient care, and how these trends differ

between the two jurisdictions. For example, more than 21,000 people across the island of Ireland were diagnosed with some form of cancer between 2000 and 2004, with the most common forms of cancer being breast, colorectal, prostate, and lung. Total incidence rates were 10.0% lower for males and 2.2% lower for females in Northern Ireland compared with Ireland. The difference, for men, was mainly due to differences in prostate cancer diagnosis. The report also showed that mortality rates were about 4% lower in Northern Ireland for both men and women.

Overall, the number of cancer diagnoses has increased due to population growth, aging, and increased screening and detection for some cancers, such as prostate and breast cancer. However, there have been improvements in survival for breast, colorectal, and prostate cancer recorded over the past decade and no cancers had their survival rates fall. As a result, cancer death rates on the island of Ireland fell between 1994 and 2004—although there are still approximately 11,000 deaths from cancer each year, many of which could be prevented through reductions in tobacco consumption.

The report made recommendations such as:

- Increasing efforts to reduce tobacco consumption
- Continuing to investigate the differences in melanoma between countries
- Studying the rising rates of uterine and breast cancers
- Introducing international standards for cancer staging and ensuring that all diagnosed cancers are staged

The full report is available at www.allirelandnci.com/publications/statistics_third_report.shtml.

Driving Registry Collaboration

Although the registries in Northern Ireland and Ireland have been collaborating on research and reports since their foundation in 1993, the advent of the All-Ireland NCI Cancer Consortium gave new momentum to this collaboration and opened up new areas of development—namely with the support of the SEER and cancer epidemiology programmes at the NCI. Some highlights of this collaboration are listed below.

All-Ireland Cancer Reports: The two registries have collaboratively produced three reports focused on cancer incidence, mortality, and survival on the island of Ireland. This unique view of the cancer burden on an All-Ireland basis has provided a valuable tool for cancer planners and researchers on the island of Ireland. The registries hope to build upon this work by establishing an All-Ireland Cancer Database and publishing an All-Ireland Cancer Atlas. Reports are available on the cancer registry Web sites www.ncri.ie or www.qub.ac.uk/nicr.

Collaborative Research: Taking advantage of the larger population and differences in health services provided by an All-Ireland approach, the two registries have a healthy programme of collaborative research and publication. This includes projects such as the impact of mammography screening on breast cancer stage, the aetiology of oesophageal adenocarcinoma and pancreatic cancer, and the relationship between water fluoridation and osteosarcoma.

Fostering Populations-Based Cancer Research

The Conference on Population-Based Cancer Research—the first conference of its kind to be held in Ireland—brought together more than 145 scientists focused in the area of population-based cancer research. It was held in Dublin on 3 September 2009 and covered a range of themes, including cancer aetiology, prevention and early detection, biomarkers, survivorship, palliative care, health economics, health services research, and registration.

Attendees came from a wide range of disciplines including nursing, public health, data management, administration, epidemiology, and oncology. The keynote speaker was Dr. Chris Wild, the

Director of the International Agency for Research on Cancer.

In addition to providing extensive opportunities for participants to exchange information, the conference also stimulated collaborations in some new areas—for instance, on a proposal for an All-Ireland study of quality of care in prostate cancer patients.

More details can be found at www.ncri.ie/news/20091113.shtml.

Developing Joint Research Activities

“Joint research activities have helped build a collaboration between the intramural epidemiology programmes at the NCI and Queen’s University in Belfast through

our project using the All-Ireland FINBAR study. Not only did it fund an important piece of science that will lead to multiple publications, it helped build a connection between our institutes that will last into the future.” (Christian Abnet, Ph.D., M.P.H., Investigator, National Cancer Institute)

Several projects have been conducted between both registries, such as:

- An All-Ireland case control study—a FINBAR-based study—of oesophageal cancers, which involves staff from the two registries and a collaboration with members from the NCI’s Intramural Research Program
- An All-Ireland pancreatic cancer case-control study that establishes a data and specimen bank for research into diagnosis, aetiology, and survival
- A comparison of trends in PSA testing, prostate biopsy, prostate cancer incidence, and mortality between Northern Ireland and Ireland

Both registries have also worked together on a number of international projects, such as:

- CONCORD: A world-wide study of cancer survival on five continents
- EURO COURSE: A project funded by the European Union to improve the use of cancer registries in European countries through programme owners’ and researchers’ networking, information exchange, and benchmarking of best practice
- EUROCHIP: A project to improve cancer health indicators also funded by the European Union



Dr. Anna Gavin

Chair of the Consortium’s Cancer Registries and Epidemiology Working Group (2009)

Dr. Anna Gavin is the Founding Director of the Northern Ireland Cancer Registry, which has worked collaboratively with the National Cancer Registry of Ireland to produce three issues of the *All Ireland Cancer Report* and to undertake several island-based research projects, including work on prostate, cervical, and breast cancer.



Dr. Harry Comber

Chair of the Consortium’s Cancer Registries and Epidemiology Working Group (2010)

Dr. Harry Comber has been closely involved with the organisation of two All-Ireland Cancer Conferences and with the Cancer Epidemiology fellows training. He is currently Chair of the Scientific Council of the International Agency for Research on Cancer and has been Director of the Irish National Cancer Registry in Cork since its foundation in 1992.

“Recent economic developments reinforce more than ever the importance of understanding the costs, financial or otherwise, of health interventions or preventative measures. Health economists can provide decision makers with solid evidence on which they can make informed decisions on the value of patient care models and systems.”

Enda Connolly, Chief Executive, Health Research Board

Health Economics

The need to increase research capacity within the fields of health economics and cancer policy analysis has been highlighted as a national priority by Ireland and Northern Ireland. Over the past few years, the Consortium has sponsored several initiatives to increase the capacity of Ireland and Northern Ireland to conduct health economics and cancer health policy research. Specific efforts to enhance training and discussions in the area of health economics have included hosting workshops in the United States and in Ireland, as well as funding fellows to attend the HRB/NCI Health Economics Fellowship in Cancer Program.

Health Economics Workshop: Connecting Researchers and Experts

On 22-23 April 2009, health economics experts from the United States, the island of Ireland, and elsewhere gathered at the Dublin City Library to discuss ways in which their work could result in better decision making to improve healthcare. The Health Economics Workshop—sponsored by the Health Research Board of Ireland, in conjunction with the National Cancer Institute in the United States and the Health and Social Care Research and Development Division of the Public Health Agency in Northern Ireland—provided an opportunity to discuss the current status of health economics policy and practise in the United States and on the island of Ireland.

There were more than 70 attendees including academic researchers, students, clinicians, and government officials. Workshop presentations covered a variety of topics—such as data resources, descriptive cost studies, and economic

and policy modelling—and included a consideration of issues related to breast cancer, colorectal cancer, lung cancer, and tobacco control.

The Health Economics Workshop provided an opportunity for current and prospective Health Economics Fellows to meet the NCI-supported mentors, and for U.S. and Irish colleagues to discuss development of the programme as well as possible joint research collaborations.

“It has been very exciting and gratifying to interact with Irish colleagues on topics of cancer-related health economics and health policy research, and to contribute to training the next generation of Irish health research professionals who will address these important issues,” said Martin Brown, NCI Health Services and Economics Branch Chief.

The next workshop on health economics and health policy research will be held in Belfast in November 2010. Presentations from the 2009 Health Economics Workshop are available at www.hrb.ie/about/events/events-2009/health-economics-workshop/presentations/.





Palliative Care and Survivorship

Palliative care is a specialized form of care typically provided by a team that includes palliative care doctors, nurses, and social workers with a focus on alleviating the pain, symptoms, and stress of serious illnesses such as cancer. Members of the All-Ireland NCI Cancer Consortium have taken a specific interest in palliative care because of the shared goal to improve the cancer experience for patients and their loved ones. Specific goals around palliative care are to increase awareness of this type of care, enhance training initiatives for healthcare professionals, and improve palliative care delivery to patients.

A growing number of professionals and volunteers are currently seeking to improve palliative care services on the island of Ireland. Professor Judith Hill, Chief Executive Officer of Northern Ireland Hospice Care, serves as the palliative care liaison and spokesperson in the All-Ireland NCI Cancer Consortium Strategic Advisory Group. In this capacity, Professor Hill brings palliative care issues, programmes, and ideas to the Consortium.

In 2009, there were some exciting collaborative activities to help reach some of the palliative care goals, including participation in a conference focused on palliative care and the submission of a bid to host the All-Ireland Institute for Hospice and Palliative Care.

All-Ireland International Conference: Pushing Boundaries in Palliative and End-of-Life Care

The two-day All-Ireland International Conference held in Belfast in October 2009 was hosted by the Northern Ireland Hospice in partnership with steering committee members from local universities and hospitals in Dublin and Cork. More than 150 attendees from health and social care professions, independent and voluntary sectors, and others engaged in end-of-life care gathered to discuss palliative and end-of-life care. Three members of the Consortium's Strategic Advisory Group were in attendance, including the two Chief Nursing Officers of Ireland and Northern Ireland.

The Conference addressed the state of scientific knowledge in palliative and end-of-life care for both malignant and non-malignant diseases, and demonstrated the relevance of this high-quality care to patients and their families, irrespective of diagnosis or care setting. Ministers of Health from the governments in Belfast and Dublin brought the cross-border policy perspectives and endorsed the importance of palliative care as a public health issue.

Speakers from Canada, the United States, Ireland, the United Kingdom, and elsewhere in Europe shared their perspectives on palliative and end-of-life care. The multi-professional audience enjoyed plenary and workshop sessions on clinical issues, family support, and bereavement.

Conference speaker Dr. Max Watson, a clinical lecturer at the University of Ulster in Northern Ireland, acknowledged the conference exceeded expectations “not just because of the quality and range of the speakers and topics covered, but more because of the manner in which the delegates so obviously enjoyed the opportunity to network together and to learn from the experience of others involved in delivering similar services in different settings from across the island.”

Answering the Call for an All-Ireland Institute for Hospice and Palliative Care

The Health Research Board, Dublin, issued a call in 2007 for the All-Ireland Institute for Hospice and Palliative Care. A collaborative group that includes Consortium members has since worked to develop a concept and secure funding pledges for a virtual Institute to drive expanded education, research, policy, and service development in palliative care across the island of Ireland.

In 2008, a cross-border team of 12 organisations—including hospices, hospitals, and universities—partnered to develop a business plan and submit the bid in October 2009. In early 2010, the bids will be undergoing international peer review and assessment,

with the final results announced in the spring of 2010.

Professor Judith Hill explained, “Working collectively on the business plan and to secure funding for the Institute provided a foundation for continued collaboration. The Institute itself has the potential to provide a vehicle for new initiatives and to bring international players together with a common goal to improve palliative care delivery on the island of Ireland.”

Tracy’s Kids International Art Exhibit: Spreading the Message of Hope and Survivorship

The Tracy’s Kids International Art Exhibition, “The Art of Healing,” is a collection of 207 drawings by childhood cancer patients at cancer centres in the United States and the Middle East. The exhibit was created to help spread the message of hope and survivorship through art and creativity. This art exhibit opened at the National Institutes of Health in Maryland before coming to Ireland in May 2009, and then traveled to Tel Aviv, Israel, in November 2009. In 2010 the exhibit will travel to other sites within the Middle East Cancer Consortium membership.

This collection of children’s paintings was displayed at St. James’s Hospital in Dublin, Ireland, as part of the CANCER 2009, International Cancer Conference, which is supported by the NCI’s Office of International Affairs. “It was touching to see the vivid drawings of so many children stricken with cancer make their way across the Atlantic to bring joy to children and families in different parts of the world. I was very happy to work with Tracy Council and my colleagues at the NCI to bring this exhibit to the NIH, and later send it over to Ireland,” reflected Isabel V. Otero, International Program Director for the OIA.

Chair of the Consortium’s Scholar Exchange and Training Working Group, Mark Lawler, felt it was important to bring the exhibition to Ireland and explains, “This is the first time that this exhibition has been seen outside



Isabel V. Otero, M.P.H.

Consortium Director, All Ireland NCI Cancer Consortium

Ms. Isabel V. Otero is director for the Consortium, coordinates the SAG and BOD meetings, and manages many other Consortium activities including the production of the annual activities report, timeline, and Web site which has won several awards under her leadership. She is the International Program Director for the NCI Office of International Affairs and serves as the primary liaison between the NCI and the island of Ireland, facilitating NCI’s involvement in a number of initiatives, including training and education. Ms. Otero received her Master of Public Health from John Hopkins Bloomberg School of Public Health and her undergraduate degree from the University of Virginia.

the USA since its launch in 2008.” The display of the exhibition in Ireland was attended by notable leaders—such as Ms. Mary Upton, T.D., Member of the Irish Parliament and Labour Party Spokesperson on the Arts, Sport and Tourism—and received recognition in the *Irish Times*, *Washington Life Magazine*, and other media.

The exhibition in Ireland was made possible through the support of the Lombardi Comprehensive Cancer Center at Georgetown University, Washington, D.C., United States; the National Cancer Institute, Bethesda, United States; and The St. James’s Hospital Arts Committee and the Children’s Medical and Research Foundation, Crumlin, Ireland. A special thanks is due to Dr. Maureen O’Sullivan, Consultant Paediatric Pathologist at Our Lady’s Children’s Hospital, for coordinating the exhibit’s visit to Our Lady’s Children’s Hospital, Crumlin, after its display at St. James’s Hospital. For more details on this initiative, please visit www.tracyskids.com.



Prevention, Early Detection, and Patient Care

Much of the burden of cancer can be traced to modifiable health behaviours that increase one's risk of the disease. Prevention and early detection are key strategies in reducing the burden of cancer on the island of Ireland. The Consortium is supporting these goals through its Prevention Working Group by promoting cancer prevention-related education, training, and research programmes on the island of Ireland and at the NCI in the United States.

More than 200 of the Consortium's alumni and scholars have been trained in cancer prevention through the NCI Cancer Prevention Fellowship Program and our NCI Summer Curriculum in Cancer Prevention courses (see Table 1). Programmes such as these help to assure a large cadre of highly-qualified cancer prevention specialists on the island of Ireland, unique to the island when compared to other regions in the world. Consortium members also participate in key meetings and symposiums and help to foster the types of collaborations needed to drive new approaches to prevention, early detection, and patient care forward.

Engaging the Public in the Fight Against Cancer

On 13 May 2009 more than 100 members of the public attended an inaugural public symposium at the St. James's Hospital Institute of Molecular Medicine in Dublin called, *The Fight Against Cancer: Where Do We Stand?* This was an opportunity for members of the community to hear speakers from the United States, Ireland, and Northern Ireland

discuss topics such as cancer services, diagnosis, therapies, and prevention.

The event, organised by the International Cancer Conference, was chaired by well-known broadcaster and author Dr. John Bowman and Dr. Muiris Houston of the *Irish Times*. "It's great to see the same speakers talk with their medical peers and with a non-scientific lay audience," said Dr. Houston.

“Providing information on cancer prevention, early diagnosis, and cancer risk are key to improving cancer outcomes and empowering the public as advocates for cancer care and cancer research.”

Dr. Joseph Simone, Director, Florida Shands Cancer Center, USA—Public Symposium Speaker



Dr. Fenton Howell

Chair of the Consortium's Prevention Working Group

Dr. Fenton Howell is a trained specialist doctor in public health medicine and a Director of Public Health with the Health Service Executive in Ireland. He is also a Clinical Senior Lecturer in the Department of Public Health and Primary Care. Whilst he has an interest in aspects of cancer prevention, he has a long history of public health advocacy, especially in tobacco control.

The Symposium started with a look at the science behind cancer. Conference organiser and Consortium member Professor Mark Lawler explained how genetics play a role in cancer development. Other speakers addressed topics such as: cervical cancer vaccination programmes; children's leukaemia treatment; and environmental and lifestyle risk factors for cancer.

At the end of the symposium, speakers were joined for a lively and informative Q&A session by the public and a panel of distinguished members of the cancer community. “The attendees found it to be a very helpful and informative event,” reflected Professor Lawler. “Public engagement highlights the role the Consortium plays in cancer research and care on the island of Ireland.”

Cancer Care Research Workshop: Fostering Collaboration

On 6 November 2009 in Antrim, Northern Ireland, 40 cancer care research leaders, including clinical nurses, came together for the Cancer Care Research Workshop as part of the Northern Ireland Annual Cancer Recognised Research Group Meeting. Researchers from the North and South shared updates on the latest programmes to improve cancer care delivery. The workshop also raised awareness of NCI training opportunities and the role of clinical nurse researchers and clinical research nurses.

The workshop was opened by Sheila O'Malley, Chief Nursing Officer (CNO), from the Department of Health and Children in Ireland, and closed by Professor Martin Bradley, CNO, Department of Health, Social Services and Public Safety in Northern Ireland.

Updates on cancer care research programmes came from several higher

education institutes including University College Cork; University of Ulster; Royal College of Surgeons in Ireland; Trinity College Dublin; Queen's University Belfast; and University College Dublin.

Anne Mills, Nursing Officer of DHSSPS, spoke about the next steps for an annual cancer care learning event. Attendees were very supportive of the learning event and positive about the workshop overall. Participants also agreed to establish an alumni network of nurses who have participated in NCI training programmes as a way to share experiences, organize TELESYNERGY® events, and coordinate an annual Cancer Care Research Workshop.

The programme was made possible with the help of the Health Research Board of Ireland and the Health and Social Care Research and Development Division at the Public Health Agency.

10 years

All-Ireland Cancer Conferences

In the last ten years, the Consortium has held four All-Ireland Cancer Conferences. The conferences occur every 2-3 years, attract hundreds of attendees, offer a multi-disciplinary overview of the most recent advances in cancer research and care, and highlight important work by Irish, American, and European scientists. Historically, the conferences have alternated between Ireland and Northern Ireland. The Department of Health and Children and the Department of Health, Social Services and Public Safety fund the conferences, which have been organised by Harry Comber (2008, 2003), Anna Gavin (2006), and Paddy Johnston (1999). The organisers lead the committee of SAG and non-SAG members that oversees the planning and implementation of the conference. The next All-Ireland Cancer Conference is expected to take place in 2011.

“We have gained experience and knowledge from ICORG beyond that of the trials themselves, which have allowed us to build our capacity and efficiency in clinical trials for our current and future patients with cancer.”

Dr. Michael McBride, Chief Medical Officer,
Department of Health, Social Services and Public
Safety, Northern Ireland

Research



The Consortium is dedicated to making progress in prevention, early detection, diagnosis, and treatment of cancer. In the cancer research arena this has been done by supporting activities and infrastructure that enable clinical trials in Ireland and Northern Ireland, expedite quality research and new discoveries, and bring researchers together to foster collaboration.

All-Ireland Cooperative Oncology Research Group (ICORG): Enabling Clinical Trials

Clinical trials not only form the backbone of any research enterprise that seeks to translate basic scientific advances into novel treatments, they also offer hope to patients who have exhausted approved therapeutic avenues. A major goal of the Consortium is to strengthen the capacity for cancer centres in Ireland and Northern Ireland to conduct cancer clinical trials, thus increasing the scientific understanding of cancers and cancer therapies as well as improving patients' access to new lifesaving therapies.

Since 2001, members of the Clinical Trials Working Group have supported this goal by funding hospitals in Ireland and Northern Ireland to develop a clinical trials programme infrastructure called the All-Ireland Cooperative Oncology Research Group (ICORG). ICORG is a not-for-profit registered charity funded by a grant from the Health Research Board (HRB) and the Health and Social Care Research and Development (HSC R&D) Division, with support from the

Irish Cancer Society. It includes a network of 14 hospitals across the island of Ireland, some of which form hubs for other participating hospitals.

ICORG has two supporting offices: the Group Central Office (GCO), located in Dublin, and the Statistics & Data Management Office (SDMO), located in Belfast. The GCO performs a project management, coordination, and administrative role, while the SDMO provides data management and statistics expertise as well as a monitoring function. ICORG's membership comprises more than 95% of the island's cancer-treating consultants and the Group has been able to offer research options to more than 3,500 patients across the island of Ireland over the past 10 years.

2009 Accomplishments

In 2009, almost 1,500 patients were accrued in 52 ICORG studies (up from 150 in 2002). In February 2009, the HRB and HSC R&D Division hosted a four-day visit by an international panel reviewing ICORG to evaluate its progress over the past three years and plans for the next three. Overall, the panel

was impressed with ICORG's efforts since the last review and recommended continued funding. They also noted several areas for improvement that ICORG is currently working on.

For more information, please visit: www.icorg.ie.

Establishing a National Cancer Biobank to Expedite Quality Research

The development of more effective interventions against cancer requires a better understanding of its molecular basis and more rapid translation of laboratory findings into improved patient care. Research studies aimed at advancing cancer prevention, diagnosis, and treatment depend on a number of key resources, including a ready supply of high-quality biological samples and related clinical data that are held in biobanks. Biobanked samples enable identification of biomarkers and drug targets, testing of new drugs, and identification of patients who will benefit from specific treatments.

Many countries have national cancer biobanking initiatives and these are complemented by international efforts to reconcile biobanking standards and operations. In recent years, the need for



Dr. Anne Cody

Chair of the Consortium's Clinical Trials Working Group

In her current post as the head of the Research Infrastructure and Special Initiatives Unit at the Health Research Board in Dublin, Dr. Cody is responsible for developing infrastructure relevant to health research in Ireland, with a particular emphasis on clinical research. Her research skills were crafted during a 10-year period that she spent performing cell biology research in Germany and Ireland prior to her current position.

10 years

ICORG

"Ireland is now in a strong position to contribute actively to research that results in better outcomes for cancer patients in Ireland and worldwide. Thousands of patients in Ireland have directly benefited from access to the latest trials. The involvement of many health professionals as well as the rigor and quality standards required for clinical trials put us in a strong position to translate research findings into everyday practise."
(Dr. Anne Cody, Chair of the Consortium's Clinical Trials Working Group)

In its first 10 years, ICORG has opened 71 research protocols and allowed access to research treatments for more than 3,500 cancer patients on the island of Ireland. ICORG has also developed strong links with many leading international cancer research groups—such as the National Surgical Adjuvant Breast and Bowel Project (NSABP), Translational Oncology Research International (TORI), Cancer Research United Kingdom (CRUK), and Breast Cancer International Research Group (BCIRG)—as well as with those in industry developing the most promising new cancer treatments. As a result of these positive relationships, Irish patients are now being offered cutting-edge treatment options that previously would only have been available in the United States and elsewhere in Europe.

ICORG currently has studies open in breast, colorectal, prostate, and non-small cell lung cancers, as well as myeloma, melanoma, and lymphoma, among others. New studies are soon to open in breast, lung, colorectal, oesophageal, lymphoma, ovarian, prostate, and pancreatic cancer, among others.

a national cancer biobank in Ireland has been acknowledged and the establishment of such a resource is specifically recommended in the National Cancer Forum's *A Strategy for Cancer Control in Ireland*. Steps are underway in Ireland to meet this recommendation and the Consortium has played an important role in the progression of this resource.

As part of the National Cancer Biobank Expert Group, Consortium members—including representatives from Ireland, Northern Ireland, and the United States—helped to outline and drive the discussions around implementing a National Cancer Biobank for Ireland. The Expert Group's objectives in 2009 were to launch a report on establishing a National Cancer Biobank and submit a draft proposal for the general scheme of the Human Tissue Bill 2009.

The publication of *Recommendations for the Establishment of a National Cancer Biobank* was announced by

the Minister for Health and Children, Mary Harney, T.D., in May 2009. Some of the report's key recommendations were to establish a National Cancer Biobank that:

- Aligns with the eight cancer centres established under the National Cancer Control Programme (NCCP)
- Provides adequate infrastructures and dedicated specialist personnel at each sample collection point
- Embeds biobanking activities within day-to-day clinical practise
- Protects the privacy and confidentiality of patients

The report also stresses the need for extensive implementation planning and includes an implementation strategy outline that describes the key areas to be addressed and lists the stakeholders who should be involved in the process.

A National Cancer Biobank will support many of the Consortium goals by providing an essential resource for the

“My most memorable event of 2009 was my participation in the annual meeting of the Irish Association for Cancer Research. In addition to the honor of being asked to deliver the Irish Cancer Society Lecture, I had the opportunity to witness firsthand this demonstration of the breadth and depth of cancer research on the island of Ireland. I came away from the meeting with the strong conviction that the quality of cancer research on the island is truly second to none. I also took pride in observing that some of the world-class research presented was being conducted by individuals who have been touched in one way or another by the All-Ireland Cancer Consortium over the course of the past decade.”

Dr. Joe B. Harford, Chair of the Consortium’s Strategic Advisory Group

advancement of patient-directed cancer research—leading to improvements in prevention, early detection, diagnosis, and treatment of cancer. Furthermore, the standardisation of sample collection will enhance quality assurance and greatly enhance research studies, which will ultimately lead to improvements in patient care.

The full report can be downloaded at www.hrb.ie/publications/hrb-publication/publications//453/.

Irish Association for Cancer Research Annual Conference: Bringing Researchers Together

The 2009 Irish Association for Cancer Research (IACR) Annual Conference took place in Athlone on 5-6 March 2009 and attracted more than 250 delegates from

across the island of Ireland. This conference offered the opportunity for attendees to hear national and international speakers discuss themes such as obesity and metabolism, translating science, stem cell biology, cell death mechanisms, and inflammation and tumour biology.

The Irish Cancer Society Lecture was delivered by Dr. Joe B. Harford, Director of the Office of International Affairs, National Cancer Institute, who spoke about “The Role of Physicians and other Health Career Professionals in Cancer Control.” The programme offered insight into how we can battle this disease through cancer prevention initiatives such as smoking cessation, lifestyle changes, and better communication between healthcare providers and patients.



Dr. Joe B. Harford

Chair of the Consortium’s Strategic Advisory Group

As SAG Chair and Director of the Office of International Affairs at the National Cancer Institute (NCI), Dr. Joe B. Harford is responsible for coordinating liaisons between NCI and cancer research institutions abroad. Dr. Harford received a Ph.D. in biochemistry from the University of Maryland Medical School and is a Founding Editor of *Current Protocols in Cell Biology*.



From left to right: John McCormack, Irish Cancer Society Chief Executive; Joe Harford, OIA Director and SAG Chair; and Mark Lawler, IACR President and Scholar Exchange and Working Group Chair at the IACR Annual Meeting.

The IACR Annual Meeting also provides an excellent opportunity for doctoral students and postdoctoral fellows to present their work, either in oral or poster presentations. In 2009, a record 140 abstracts were submitted.



Partners



Department of Health and Children Ireland

The Department of Health and Children (DoHC) supports the Minister for Health and Children in the formulation and evaluation of policies for the health services. In conjunction with the Health Service Executive (HSE) and other interested parties, the Department also has a role in the strategic planning of health services.

In accordance with *A Strategy for Cancer Control in Ireland 2006*, the HSE established a National Cancer Control Programme in 2007. The goals of the Programme are to improve cancer prevention, detection, treatment, and survival through a national service based on evidence and best practise.

Under the Programme, there are four Managed Cancer Control Networks, with two cancer centres within each Network serving a minimum population of 500,000. Ultimately, all cancer diagnostic and surgical services will be provided within these eight centres. Chemotherapy, when required, can be delivered locally in accordance with protocols set out by the multi-disciplinary team based in the designated centre. The process of moving diagnostic and surgical cancer services from non-designated hospitals to the designated cancer centres is ongoing.

Free breast and cervical cancer screenings are now available to women throughout Ireland. BreastCheck offers free screening to all women aged 50-64 years. CervicalCheck offers free cervical screening in primary care settings to the 1.1 million women living in Ireland aged 25-60 years.

The DoHC also supports the National Cancer Registry, Ireland (NCRI), which collects high-quality information on cancer and promotes the use of this information in reducing cancer incidence and improving survival. The Registry also provides essential input to the formation, implementation, and monitoring of data relating to clinical activities and outcomes under the National Cancer Control Programme. The current Minister for the DoHC is Mary Harney, T.D.

Further information can be found at www.dohc.ie.



Department of Health, Social Services and Public Safety Northern Ireland

The mission of the Department of Health, Social Services and Public Safety (DHSSPS) is to improve the health and social well-being of all people in Northern Ireland by ensuring appropriate health and social care services in both the community and clinical settings, such as hospitals and general practise. The DHSSPS also supports health improvement programmes that are designed to secure improvement in health and social well-being and reduce health inequalities.

Several professional groups serve as advisors to DHSSPS administration and the Medical and Nursing Groups are represented in the Consortium's membership. The current Minister for DHSSPS for Northern Ireland, Michael McGimpsey, was appointed in May 2007.

The Northern Ireland Executive's *Programme for Government* (PfG) document details its plans and priorities for 2008-2011 and sets the strategic context for DHSSPS current planning arrangements. In addition to the PfG, the Department produces the *Priorities for Action* (PfA) document on an annual basis, which describes the Health Minister's "priority areas" for the delivery of services through the Health and Social Care (HSC) system.

In 2005, DHSSPS established the Northern Ireland Cancer Network (NICaN) to promote equal access to high-quality, patient-focused, and clinically-effective cancer care. NICaN supports professionals, patients, and volunteers in working together to achieve these goals.

The Northern Ireland Executive is currently in the process of finalizing the Review of Public Administration (RPA) with the objective to reduce bureaucracy and concentrate resources on the frontline of care. The recommendations arising from the RPA are being implemented in two major phases for health and social care services:

- Phase 1 involved the establishment of five new integrated HSC Trusts (*launched April 2007*).
- Phase 2 established the Health and Social Care Board and Public Health Agency, which are jointly responsible for producing an integrated plan to see what progressive service improvements are brought about by investments that are made based on evidence of effectiveness and a drive for quality and efficiency (*launched April 2009*).

Further information can be found at www.dhsspsni.gov.uk.



National Cancer Institute United States

The National Cancer Institute (NCI) is part of the National Institutes of Health (NIH), which is one of 11 agencies that compose the Department of Health and Human Services (HHS). The NCI, established under the National Cancer Institute Act of 1937, is the federal government's principal agency for cancer research and training. The National Cancer Act of 1971 broadened the scope and responsibilities of the NCI and created the National Cancer Program. Over the years, legislative amendments have maintained the NCI authorities and responsibilities, and added new information dissemination

mandates as well as a requirement to assess the incorporation of state-of-the-art cancer treatments into clinical practise.

The NCI coordinates the National Cancer Program, which conducts and supports research, training, health information dissemination, and other programmes with respect to the cause, diagnosis, prevention, and treatment of cancer, rehabilitation from cancer, and the continuing care of cancer patients and their families. Specifically, the Institute:

- Supports and coordinates research projects conducted by universities, hospitals, research foundations, and businesses throughout the country and abroad through research grants and cooperative agreements
- Conducts research in its own laboratories and clinics
- Supports education and training in fundamental sciences and clinical disciplines for participation in basic and clinical research programmes and treatment programmes relating to cancer through career awards, training grants, and fellowships
- Supports research projects in cancer control
- Supports a national network of cancer centres
- Collaborates with voluntary organisations and other national and foreign institutions engaged in cancer research and training activities
- Encourages and coordinates cancer research by industrial concerns where such concerns evidence a particular capability for programmatic research
- Collects and disseminates information on cancer
- Supports construction of laboratories, clinics, and related facilities necessary for cancer research through the award of construction grants

Kathleen Sebelius was sworn in as the Secretary of the HHS on 28 April 2009. Dr. Francis S. Collins was appointed as Director of the NIH on 7 August 2009, and Dr. John Niederhuber served as the Director of the NCI throughout 2009.

Further information can be found at www.cancer.gov.



Health Research Board *Ireland*

In conjunction with Northern Ireland's Health and Social Care Research and Development (HSC R&D) Division, Ireland's Health Research Board (HRB) is responsible for funding many Consortium programmes, including the clinical trials network and scholar exchange programmes. In 1986, Ireland's Minister of Health and Children established the HRB to improve people's health, patient care, and health service delivery.

The HRB has invested close to €50 million in cancer research since 2005 and is focused on long-term strategies such as developing infrastructure and building capacity in cancer research across a variety of disciplines. This funding strategy encompasses two goals:

- Driving the development of excellent clinical research, including applied biomedical research, within a coherent health research system
- Building capacity to conduct high-quality population health science and health services research

These goals align well with the objectives of the Consortium, and the HRB works closely with partners in Ireland, the United Kingdom, Europe, and the United States to achieve its goals.

Further information can be found at www.hrb.ie.



Health and Social Care Research and Development Division *Northern Ireland*

The Health and Social Care Research and Development (HSC R&D) Division of the Public Health Agency works to encourage and support HSC research throughout Northern Ireland. The move of the former HSC R&D Office to the new Public Health Agency has not changed its remit and the HSC R&D Division continues to provide a wide range of support for research across all sectors of health and social care, and for all professions engaged in clinical research.

The HSC R&D Division continues to work with a variety of partner organisations to help bridge professional, organisational, sectoral, and geographic boundaries and help develop Northern Ireland as a national and international centre for research and development in health and social care.

Further information can be found at www.publichealth.hscni.net.



Office of International Affairs *United States*

The NCI Office of International Affairs (OIA) is the focal point for execution of many (though not all) of the Institute's international outreach programmes, which are pursuant to these mandates. Specifically, OIA is charged with:

- Coordinating, planning, management, and evaluation of the international research, control, and information activities of the National Cancer Program
- Serving as the NCI focal point with the Fogarty International Center, the Office of Global

Health Affairs of the Department of Health and Human Services, the State Department, and other federal organisations involved in international health activities

- Coordinating cancer activities under formal and informal collaborative agreements between the United States and other countries
- Planning and implementing programmes for the international exchange of scientists
- Liaising with international agencies involved in the National Cancer Program

Further information can be found at <http://oia.cancer.gov>.

Consortium Governance Body

Board of Directors

Dr. Tony Holohan (Chair 2009)

Chief Medical Officer, Department of Health and Children (Ireland)

Dr. Michael McBride

Chief Medical Officer, Department of Health, Social Services and Public Safety (Northern Ireland)

Dr. John E. Niederhuber

Director, National Cancer Institute (United States)

Consortium Director

Ms. Isabel V. Otero

International Program Director, Office of International Affairs, National Cancer Institute (Bethesda)

Strategic Advisory Group

Representatives of Participating Jurisdictions

Dr. Joe B. Harford (Chair)

Director, Office of International Affairs, National Cancer Institute (Bethesda)

Mr. Enda Connolly

Chief Executive, Health Research Board (Dublin)

Professor Bernadette Hannigan

Director of R&D and Chief Scientific Advisor, Health and Social Care Research and Development, Public Health Agency (Belfast)

Working Group Chairs

Cancer Registries and Epidemiology

Dr. Anna Gavin (2009)

Director, Northern Ireland Cancer Registry (Belfast)

Dr. Harry Comber (2010)

Director, National Cancer Registry Ireland (Cork)

Clinical Trials

Dr. Anne Cody

Head of Research Infrastructure and Special Initiatives Unit, Health Research Board (Dublin)

Information Technology

Professor Donal Hollywood

Marie Curie Professor of Clinical Oncology, Head of the Academic Unit of Clinical and Molecular Oncology, Trinity College Dublin (Dublin)

Nursing

Mr. Martin Bradley (2009)

Chief Nursing Officer, Department of Health, Social Services and Public Safety (Belfast)

Sheila O'Malley (2010)

Chief Nursing Officer, Department of Health and Children (Dublin)

Prevention

Dr. Fenton Howell

Director of Public Health, HSE Population Health Directorate (Navan)

Scholar Exchange and Training

Professor Mark Lawler

Associate Professor of Experimental Haematology/Oncology, Trinity College Dublin (Dublin)

Other Strategic Advisory Members

Dr. Lee J. Helman

Scientific Director for Clinical Research, Center for Cancer Research, National Cancer Institute (Bethesda)

Dr. Mary Hynes

Cancer Network Manager, West, National Cancer Control Programme (Dublin)

Professor Richard Kaplan

Associate Director, National Cancer Research Network (Leeds and London)

Professor Elaine Kay

Consultant Histopathologist, The Royal College of Surgeons and Beaumont Hospital (Dublin)

Professor Michael Kerin

Professor/Head of the Department of Surgery, National University of Ireland (Galway)

Professor Judith Hill

Chief Executive Officer, Northern Ireland Hospice Care (Newtownabbey)

Professor Dennis McCance

Director, Centre for Cancer Research & Cell Biology, Queen's University Belfast (Belfast)

Dr. Richard Wilson

Director, Northern Ireland Cancer Clinical Trials Unit, Belfast City Hospital (Belfast)



Funding of Consortium Initiatives

The Consortium is focused on endeavours that encompass all aspects of cancer control and its members work collectively to fund initiatives to make a broad impact. This cooperation enables improved scientific programmes in each jurisdiction in the following areas:

- Research (including biobanks)
- Diagnosis and treatment
- Palliative care and survivorship
- Cancer policy analysis and health economics
- Education and training for physicians, nurses, and scientists
- Epidemiology (including registry and surveillance)
- Prevention and early detection
- Interactions aimed at enhanced public health and patient care
- Quality assurance

Funded projects must be consistent with the policies and strategic cancer plans of the three jurisdictions and must exhibit potential for wider applicability within Ireland, Northern Ireland, and the United States. Additionally, projects must enhance cancer care and research. Each partner directly funds its share of programmes established under the auspices of the Consortium. The tables below provide examples of initiatives funded by Ireland, Northern Ireland, and the United States.

2009 Ireland (HRB) and Northern Ireland (HSC R&D Division) Funded Initiatives

Scholar Exchange	<ul style="list-style-type: none"> • HRB/NCI Health Economics Fellowships • Travel support, stipends, and other expenses for participants of scholar exchange programmes at the NCI, such as the Summer Curriculum in Cancer Prevention
Clinical Trials Network	<ul style="list-style-type: none"> • Twelve hospitals to develop the capacity for clinical trials, as part of the All-Ireland Cooperative Oncology Research Group (ICORG), including a headquarters in Dublin and statistics and data management function in Belfast
Information Technology	<ul style="list-style-type: none"> • TELESYNERGY® expansion to two remaining site locations in Ireland
Cancer Registries	<ul style="list-style-type: none"> • Reports, projects, and other support to harmonize data systems to spur new research in epidemiology

2009 United States (NCI) Funded Initiatives

Scholar Exchange	<ul style="list-style-type: none"> • Travel support for U.S. scholars • In-kind contributions related to training and workshops in the United States • On-site expenses for scholar exchange programmes
Organisational Support	<ul style="list-style-type: none"> • Development and maintenance of Consortium extranet, contact database, and award-winning Web site • Production of Consortium Annual Activities Report, Timeline, and Newsletter • Administration of Consortium governing activities
Information Technology	<ul style="list-style-type: none"> • Travel expenses for the NCI Center for Information Technology (CIT) experts

Learn More

Communicating success and progress to the health professionals and general public of all three member jurisdictions is a high priority for the Ireland-Northern Ireland-National Cancer Institute Cancer Consortium. To keep our community members informed, the Consortium uses a multi-pronged approach, including our Web site, newsletters, annual activities reports, help desk, and more. Through these channels, individuals and organisations can stay up-to-date on the latest news of the Consortium, including membership, funding opportunities, and cancer-related conferences and events.



Award-winning Web Site

www.allirelandnci.org

The Web site is the hub of Consortium communication and is updated regularly with information about Consortium-sponsored educational opportunities, fellowships, and funding for U.S. and island of Ireland oncologists, nurses, and researchers.



Publications

www.allirelandnci.org/publications

The Consortium's newsletters and annual activities reports highlight our accomplishments as well as the activities, people, and events associated with the organisation. PDF versions of all issues and reports are available online in the Publications section of the Consortium Web site. Hard copies can be requested.



Help Desk

consortium@caner.gov

The Consortium Help Desk provides e-mail support for individuals and organisations seeking assistance in connecting with participating partners. Help Desk staff will direct inquiries to the appropriate Consortium contact and will provide answers to questions related to Consortium programmes and activities.

This 2009 Annual Activities Report was prepared on behalf of the Board of Directors of the Ireland-Northern Ireland-National Cancer Institute Cancer Consortium and is distributed to the cancer research communities in Ireland, Northern Ireland, and the United States, as well as to individuals and institutions that share the Consortium's vision of implementing global cancer control through collaborative research and education. Throughout the document, UK-English spellings have been used unless a proper noun or improving clarity indicated otherwise.



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